		OF AMERICA F ATTORNEY FOR PATE	NT APPLICATION		GS FILE NO. - 1252
COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION P Q - Q 5 As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name;					
As a below named inventor, I her that I verily believe that I am the orig named) of the subject matter which is	inal, first and	i sole inventor (if only one i	name is listed below) of	a ioini inventor	clow next to my-name; (if plural inventors are
WIRELESS LOCAL AREA NETWORK SYSTEM, FAULT RECOVERY METHOD, AND RECORDING MEDIUM					
STORED THEREIN A COMPUTER PROGRAM EXECUTING THE FAULT RECOVERY PROCESS					
the specification of which is attached hereto, unless the following box is checked:					
was filed on as United States patent Application Number or PCT International patent application number (if any).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to be material to patentability in accordance with Title 37, Code of Federal					
Regulations, §1.56. I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or					
I hereby claim priority benefits un United States provisional application(having a filing date before that of the	s) listed below	w and have also identified be	elow any foreign applic	n(s) for patent or ation for patent o	inventor's certificate or inventor's certificate
Prior Foreign or Provisional Applicat	ion(s)				
COUNTRY	APPLI	CATION NUMBER	DATE OF FILING (day, month, year)		PRIORITY CLAIMED UNDER 35 U.S.C. 119
Japan	86183/	1999	29, 3, 19	99	YES X NO
					YES NO
					YES NO
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I hereby claim the benefit under subject matter of each of the claims of paragraph of Title 35, United States (Title 37, Code of Federal Regulation international filing date of this applications.)	of this applica Code, §112, l s, §1.56 whic	ition is not disclosed in the p I acknowledge the duty to di	prior United States applisclose information which	ication in the mai ch is material to r	nner provided by the first patentability as defined in
UNITED STATES APPLICATION NUMBER				STATUS (patented, pending, abandoned)	
				1	
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I hereby appoint OSTROLENK, FABER, GERB & SOFFEN, and the members of the firm, Marvin C. Soffen - Reg. No. 17,542; Samuel H. Weiner - Reg. No. 18,510; Jerome M. Berliner - Reg. No. 18,653; Robert C. Faber - Reg. No. 24,322; Edward A. Meilman - Reg. No. 24,735; Stanley H. Lieberstein - Reg. No. 22,400; Steven I. Weisburd - Reg. No. 27,409; Max Moskowitz - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944 and Louis C. Dujmich - Reg. No. 30,625, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence. SEND CORRESPONDENCE TO: OSTROLENK, FABER, GERB & SOFFEN DIRECT TELEPHONE CALLS TO:					
1180 AVENUE OF THE AMERICAS (212) 382-0700 NEW YORK, NEW YORK 10036-8403					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
FULL NAME OF SOLE OR FIRST INVENT FUMIHISA SHIMONO	ror	INVENTOR'S SIGNATURE	TO (B)		DATE 3/22/2000
RESIDENCE		- Aug / J- J-		COUNTRY OF C	A
Tokyo, Japan Japan					
POST OFFICE ADDRESS	7_1 c	hiba 5-ahama M	inata ku Tak		
c/o NEC Corporation, 7-1, Shiba 5-chome, Minato-ku, Tokyo, Japan Full NAME OF SECOND JOINT INVENTOR (F ANY) INVENTOR'S SIGNATURE DATE					
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) INVENTOR'S SIGNATURE					
RESIDENCE CO				COUNTRY OF C	CITIZENSHIP
POST OFFICE ADDRESS					
FULL NAME OF THIRD JOINT INVENTO	R (IF ANY)	INVENTOR'S SIGNATURE			DATE
RESIDENCE COUNTRY C					I CITIZENSHIP
POST OFFICE ADDRESS				<u>. </u>	